CLAIMS ONLY

Application Number	Filing Date
09/974210	
Applicant(s)	

*May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
~~2~~						
3						
4						
5						
6						
7						
8						
~~9~~						
10						
11						
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13						
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15						
16						
17						
~~18~~						
19						
20						
21						
22	1					
~~23~~						
~~24~~						
~~25~~						
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36	1					
37						
38						
39						
40						
41						
42						
43						
44	1					
45						
46						
47						
48	1					
49						
50						
Total Indep						
Total Depend						
Total Claims						

CLAIMS	Indep	Depend	Indep	Depend	Indep	Depend
51						
52		1				
53	1					
~~54~~						
55						
56						
57						
58						
59						
60						
~~61~~						
62					2	
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94						
95						
96						
97						
98						
99						
100						
Total Indep	6					
Total Depend	47					
Total Claims	53					